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TRANSMITTAL FORM		Application Number	10/768,996
		Filing Date	January 30, 2004
		First Named Inventor	Srivastava
		Art Unit	1632
		Examiner Name	Not Known
		Attorney Docket Number	CHMG-10
(to be used for all correspondence after initial filing)		Total Number of Pages in This Submission	2

ENCLOSURES (Check all that apply)		
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Firm Name	Inna Shtivelband Landsman, P.C.		
Signature			
Printed name	Inna Landsman		
Date	6/27/05	Reg. No.	44337

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Typed or printed name	Inna Landsman	Date 6/27/05

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**REQUEST FOR WITHDRAWAL
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Application Number	10/768,996
Filing Date	January 30, 2004
First Named Inventor	Srivastava
Art Unit	1632
Examiner Name	Not known
Attorney Docket Number	CHMG-10

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
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<input checked="" type="checkbox"/> Firm or Individual Name	Suresh C. Srivastava, Ph.D.				
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Signature					
Name	Inna Landsman			Registration No.	44337
Date	6/27/05			Telephone No.	781-648-0375

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